

ORI MI-	Court address	Court telephone no.
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4. The name of each attorney who represented me at any time after my arrest, and the stage of the case at which each attorney was representing me are as follows:

**Before completing the request, please read the following:** The remaining portion of this form must specify 1) the relief requested; 2) the grounds for the relief requested; 3) the facts supporting each ground in summary form; 4) whether any of the grounds for the relief requested were raised before; if so, at what stage of the case, and if not, the reasons they were not raised; 6) whether you want the appointment of counsel, and if so, information necessary for the court to determine whether you are entitled to appointment of counsel at public expense (or complete form MC 222). If more space is needed, attach additional sheets. You may attach to this motion any affidavit, document, evidence, or memorandum of law to support the relief requested.

**REQUEST:**

I declare that the statements above are true to the best of my information, knowledge, and belief.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature

**PROOF OF SERVICE**

**To be completed by the court.**

I certify that on this date a copy of this motion was served upon the prosecutor by ☐ personal service. ☐ mail.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature